

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination

## UNITED STATES DISTRICT COURT

for the

Northern District of Alabama

2017 MAY -4 AM 11:34

U.S. DISTRICT COURT  
N.D. OF ALABAMA

Case No.

(to be filled in by the Clerk's Office)

Ashley Simone Carter

Plaintiff

(Write your full name. No more than one plaintiff may be named in a pro se complaint.)

Jury Trial: (check one) ☐ Yes ☐ No

Family Dollar Stores of AL Alabama Inc.

Patricia Sales Manager

Jonathan Reynolds Gen. Manager.

2:17-cv-00718-SGC

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## COMPLAINT FOR EMPLOYMENT DISCRIMINATION

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

Ashley C. Carter  
 Bessemer 2412 Berkley Ave. 35020  
 Bessemer  
 Alabama 35020  
 205 200-8706  
 acarter5950@students.lawsonstate.edu

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination

☐ Check here to receive electronic notice through the email listed above. By checking this box, the undersigned consents to electronic service and waives the right to personal service by first class mail pursuant to Federal Rules of Civil Procedure 5(b)(2), except with regard to service of a summons and complaint. The Notice of Electronic Filing will allow one free look at the document, and any attached PDF may be printed or saved.

5/4/17  
Date

Ashley C. ...  
Participant Signature

### B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

(Am) Jonathan Reynolds  
(Patricia Sales)

#### Defendant No. 1

Name Family Dollar Stores of AL Inc.  
Job or Title (if known) Manager (Sales) Gen. Manager (Reynolds)  
Street Address 430 4th Avenue  
City and County Deseamer, Jefferson  
State and Zip Code Alabama 35020  
Telephone Number (205) 424-2454  
E-mail Address (if known) N/A

#### Defendant No. 2

Name  
Job or Title (if known)  
Street Address  
City and County  
State and Zip Code  
Telephone Number  
E-mail Address (if known)

#### Defendant No. 3

Name  
Job or Title (if known)  
Street Address  
City and County  
State and Zip Code  
Telephone Number  
E-mail Address (if known)

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## Defendant No. 4

Name \_\_\_\_\_

Job or Title (if known) \_\_\_\_\_

Street Address \_\_\_\_\_

City and County \_\_\_\_\_

State and Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address (if known) \_\_\_\_\_

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is

Name

Street Address

City and County

State and Zip Code

Telephone Number

Family Dollar Stores of AL. Inc.  
 430 4<sup>th</sup> Avenue  
 Bessemer, Jefferson  
 Alabama, 35020  
 (205) 424-2454

**II. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to (check all that apply):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)



Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)



Other federal law (specify the federal law):

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- ☐ Relevant state law (specify, if known):
- ☐ Relevant city or county law (specify, if known):

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (check all that apply):

- ☐ Failure to hire me.
- ☒ Termination of my employment.
- ☒ Failure to promote me.
- ☐ Failure to accommodate my disability.
- ☒ Unequal terms and conditions of my employment.
- ☒ Retaliation.
- ☒ Other acts (specify): Confidentiality breach

(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

12/31/2016

C. I believe that defendant(s) (check one):

- ☐ is/are still committing these acts against me.
- ☒ is/are not still committing these acts against me. No longer working there!

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While being interviewed on Nov 2016, I explained that I was manager at McDonalds and was robbed at gunpoint. I did not return in fear of my life. Because I did not return, I explained to Ms. Sales why <sup>(while my children were present)</sup> I explained that I really needed the job. Ms. Sales stated 'I believe God sent you to me'. I started to tell her about my struggles (she asked) She used it against me! And discussed my personal info with others. I was fired two days before Christmas. Lost my home & car.

D. Defendant(s) discriminated against me based on my (check all that apply and explain):

- ☒ race \_\_\_\_\_  
☒ color \_\_\_\_\_  
☐ gender/sex \_\_\_\_\_  
☐ religion \_\_\_\_\_  
☐ national origin \_\_\_\_\_  
☐ age (year of birth) \_\_\_\_\_ (only when asserting a claim of age discrimination.)  
☐ disability or perceived disability (specify disability) \_\_\_\_\_

E. The facts of my case are as follows. Attach additional pages if needed.

Because I did not return to McDonalds I was locked out as a suspect + that was not the case. I feared for my life as well as my children because I drove a gold Buick Sentra 98" + it was the only car visible on site. I live in a small area + knew that my car could be pin pointed. I explained all this to Ms. Sales. While off two days, Ms. Sales trained another female for my position. When I returned to work she said I stole 2 dollars from the store based on what another employee said (Kamisha K - who now is not employed there).

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

I asked the manager to run the camera back because I was falsely accused + she would not. I received tips all the time + instead of keeping it I always put it in the safe with a receipt. I was given the option to admit to false theft accusations to be placed on record or stopped driver.

#### IV. Exhaustion of Federal Administrative Remedies

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

March 22, 2017

B. The Equal Employment Opportunity Commission (check one):

- ☐ has not issued a Notice of Right to Sue letter.  
☒ issued a Notice of Right to Sue letter, which I received on (date) March 22, 2017

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

**C. Only litigants alleging age discrimination must answer this question.**

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (*check one*):

- ☐ 60 days or more have elapsed.  
☐ less than 60 days have elapsed.

**V. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

**VI. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

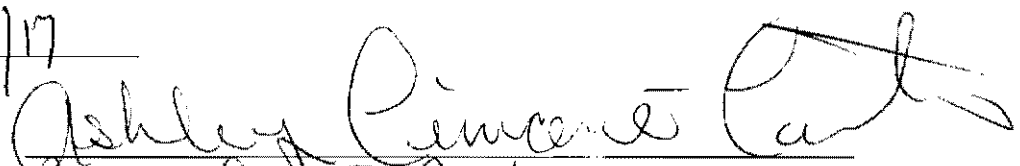
**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 5/4/17

Signature of Plaintiff

Printed Name of Plaintiff

  
Ashley Simone Carter

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination

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**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Name of Law Firm \_\_\_\_\_

Street Address \_\_\_\_\_

State and Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

## TRANSMISSION VERIFICATION REPORT

TIME : 01/27/2017 12:54  
 NAME :  
 FAX :  
 TEL :  
 SER.# : U63274K3J519546

DATE, TIME  
 FAX NO. /NAME  
 DURATION  
 PAGE(S)  
 RESULT  
 MODE

01/27 12:53  
 13342420539  
 00:01:19  
 03  
 OK  
 STANDARD

VISITOR



U.S. EEOC

Name: Ashley Carter  
 Destination: EEOC  
 Date: 3/22/17 Time In: 11:35



Bessemer Public Library  
 Investing in Our Future

400 10<sup>th</sup> Street North  
 Bessemer, AL 35020

Phone: 205-428-7882  
 Fax: 205-428-5479  
 www.bessemerlibrary.com

Alabama Dept. of Labor

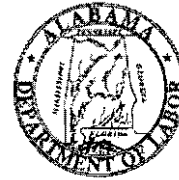
TO:	Board of Appeals Office, Room 2206	FROM:	Ashley C. Carter
FAX:	334-242-0539	PAGES:	3
PHONE:		DATE:	01/27/2017
RE:		CC:	

<input checked="" type="checkbox"/> Urgent	<input checked="" type="checkbox"/> For Review	<input type="checkbox"/> For Approval	<input type="checkbox"/> For Action	<input type="checkbox"/> For Information
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AT-4

STATE OF ALABAMA  
DEPARTMENT OF LABOR  
HEARINGS AND APPEALS DIVISION  
MONTGOMERY, ALABAMA 36130




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**DECISION ON UNEMPLOYMENT COMPENSATION CLAIM**

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**CLAIMANT**

ASHLEY C CARTER  
2412 BERKLEY AVE  
BESSEMER AL 35020

**EMPLOYER**

FAMILY DOLLAR STORES OF AL  
ALABAMA INCORPORATED  
UC EXPRESS  
PO BOX 283  
ST LOUIS MO 63166-0283

**APPELLANT:** CLAIMANT  
**LOCATION :** TELEPHONE  
**OC NO. :** 00-22

**DATE MAILED :** 02/10/17  
**CASE NO. :** 00747-AT-17  
**S. S. NO. :** XXX-XX-5950  
**HEARING DATE:** 02/09/17

**APPEARANCES AT THE HEARING:** Claimant and employer representative

**ISSUE(S):** Voluntarily leaving most recent bona fide work without good cause connected with such work. Section 25-4-78(2) Code of Alabama 1975

**FINDINGS:** The claimant appealed an Examiner's determination imposing a disqualification and denying benefits under Section 25-4-78(2) of the Unemployment Compensation Law. The determination was based upon a finding that the claimant left most recent bona fide work with this employer voluntarily and without good cause connected with work.

The claimant worked for the listed employer from November 12, 2016, until December 22, 2016, as an assistant manager. Another employee reported the claimant did not complete her assignment. The manager wrote the claimant up for allegedly not doing an assignment. The claimant disagreed with the write up. The claimant was told to accept the write up or leave. The claimant left. She contacted the district manager to discuss the issue. The claimant was told there would be a meeting with all involved the following day. The claimant reported to work as scheduled on December 23, 2016. The manager would not allow her to return to clock in or return to work. The claimant denies quitting her job.

**CONCLUSIONS:** Section 25-4-78(2) of the Law provides that an individual shall be disqualified if she quit her most recent bona fide work without good cause connected with work. "Good cause" is defined as, substantial reason; just ground for such action; adequate excuse that will bear the test of reason; and always the element of good faith. A test of good cause is whether it is reasonable when measured by what the average or normal worker would have done under similar circumstances. The preponderance of evidence shows the claimant was told to leave work as she did not agree with a write up. The evidence also shows the claimant contacted upper management and attempted to resolve the issue. The evidence further shows the claimant attempted to return to work as instructed, but the manager would not allow her to clock in. The evidence shows the employer did not attempt to resolve the conflict. There is insufficient evidence to show the claimant left her job voluntarily. Therefore, the claimant is not subject to a disqualification under this section of the Law.

**DECISION:** The Examiner's determination is reversed. The disqualification imposed under Section 25-4-78(2) of the Unemployment Compensation Law is removed and the reduction in the maximum amount of benefits payable is restored.

**APPEAL RIGHTS:** This decision becomes final unless an application for leave to appeal to the Board of Appeals is received in writing at the Department address above or by fax at 334-956-7494 on or before the **FINAL DATE OF February 27, 2017.**

If an appeal is filed, and the claimant remains unemployed, the claimant should continue to file weekly claims on time pending the outcome of the appeal. Payments can only be made for eligible weeks for which timely claims have been filed.



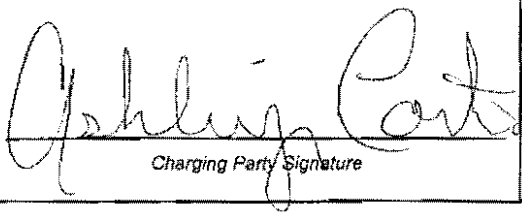
Effie R. Dowdell  
Administrative Hearing Officer

ERD/mp

62517-178 0281

EEOC Form 5 (11/09)

<b>CHARGE OF DISCRIMINATION</b> <small>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</small>		Charge Presented To:      Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC <b>420-2017-01437</b>	
_____ and EEOC <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) <b>Ms. Ashley Carter</b>		Home Phone (incl. Area Code) <b>(205) 200-8706</b>	Date of Birth <b>1990</b>
Street Address      City, State and ZIP Code <b>2412 Berkley Avenue, Bessemer, AL 35020</b>			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>FAMILY DOLLAR</b>		No. Employees, Members <b>500 or More</b>	Phone No. (include Area Code) <b>(205) 424-2454</b>
Street Address      City, State and ZIP Code <b>430 - 4th Avenue, Bessemer, AL 35020</b>			
Name  		No. Employees, Members  	Phone No. (include Area Code)  
Street Address      City, State and ZIP Code  			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest      Latest <b>12-31-2016      12-31-2016</b> <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <p><b>I was hired as an Assistant Manager with the above named employer in November of 2016. I performed my job in a satisfactory manner; however I was constantly harassed by my supervisor. My supervisor would criticize every action that I took when I was trying to perform my job. There were other persons hired in other positions, however I was the only person who was treated as I was. When I made complaints about my treatment, my supervisor told me "if you don't want this job you can leave." In December of 2016, I was given the option of resigning from my job or being fired. I chose to resign. My supervisor falsely accused me of stealing. I asked her to review the cameras so that she would be able to see that I did not steal from the company.</b></p> <p><b>I believe that I have been discriminated against and retaliated against because of my race in violation of Title VII of the Civil Rights Act of 1964, as amended.</b></p>			

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I declare under penalty of perjury that the above is true and correct.	NOTARY – When necessary for State and Local Agency Requirements I swear or affirm that I have read the above charge and that it is true to the best of my knowledge and belief. SIGNATURE OF COMPLAINANT <div style="text-align: center;">   <b>Mar 22, 2017</b>  <small>Date</small>      <small>Charging Party Signature</small> </div>
SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE <small>(month, day, year)</small> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>RECEIVED</b>  <b>MAR 22 2017</b>  <b>E.E.O.C.</b>  <b>BIRMINGHAM DISTRICT</b> </div>	

FORM BEN-7  
REV. 02-13

STATE OF ALABAMA  
DEPARTMENT OF LABOR  
UNEMPLOYMENT COMPENSATION DIVISION  
MONTGOMERY, ALABAMA 36131

EMPLOYER WAGE REPORT FOR QUALIFYING PERIOD  
PAYMENTS PENDING FINAL APPROVAL OF CLAIM

ASHLEY C CARTER  
218 3RD AVE N  
BESSEMER

AL 35020 6727

DATE 12/30/16 PAGE 1  
SSN XXX-XX-5950  
CLAIM DATE 12/25/16  
6002

BASE PERIOD WAGES

EMPLOYER	JUL-SEP 15	OCT-DEC 15	JAN-MAR 16	APR-JUN 16	EMP-TOT
ROSS DRESS F					
SIC0000	1,445.40	.00	.00	.00	1,445.40
DEDICATED PE					
SIC0000	.00	.00	80.00	1,815.48	1,895.48
BERCKMANS FO					
SIC0000	.00	.00	.00	567.04	567.04
QUARTER TOTALS	1,445.40	.00	80.00	2,382.52	3,907.92
					TOTAL WAGES

WEEKLY BENEFIT AMOUNT - 74.00 MAXIMUM BENEFIT AMOUNT - 1,303.00  
MESSAGE EFFECTIVE AUGUST 1, 2012 THE FIRST PAYABLE WEEK OF A CLAIM  
IS A WAITING WEEK.

AVERAGE OF TWO HIGH QUARTERS = \$ 1,913.96 MAILED 12/30/16  
REDET DATE 00/00/00 REDET CODE 0

\*\*\*\*\*  
REVIEW CAREFULLY TO ENSURE THAT THE WAGES AND EMPLOYERS FOR THE PERIOD  
INDICATED ABOVE ARE CORRECT. WAGES FOR MILITARY SERVICE, FEDERAL CIVILIAN  
EMPLOYMENT, OR WAGES EARNED IN STATES OTHER THAN ALABAMA MAY NOT APPEAR ON  
THIS DOCUMENT BUT MAY BE ADDED LATER. IF THAT OCCURS, YOU WILL BE MAILED A  
SECOND DETERMINATION. TO CORRECT ERRORS, CALL 1-800-361-4524. FOR FURTHER  
EXPLANATION AND APPEAL RIGHTS, SEE YOUR 'RIGHTS AND RESPONSIBILITIES'  
BOOKLET. DO NOT DISCARD THIS FORM AS THERE IS A CHARGE FOR ADDITIONAL COPIES.